



TESTIMONY

Submitted by Tracy Wodatch, President and CEO
The Connecticut Association for Healthcare at Home

Higher Education and Employment Advancement Committee
February 7, 2023

HB 5438 An Act Establishing a Debt-Free State College Program for Employees of Day Care Facilities, Home Health Care Agencies and Nursing Homes
HB 5441 An Act Concerning College Graduates Who Work in the Fields of Education or Health Care in the State

Senator Slap, Representative Haddad and distinguished members of the Higher Education and Employment Advancement Committee, my name is Tracy Wodatch, President and CEO of the Connecticut Association for Healthcare at Home. I am also an RN with 40 years' experience.

The CT Association for Healthcare at Home is the united voice for our licensed home health and hospice agencies as well as several non-medical Homemaker-Companion Agencies. Together, our members provide services that foster cost-effective home care for Connecticut's residents in the setting they prefer most – their own homes.

Given the severe workforce shortages especially in home health care and hospice, we support initiatives, like these two bills, that build the healthcare workforce pipeline through affordable education.

Our Home Care providers have been experiencing workforce shortages since long before the pandemic. Unfortunately, the pandemic has pushed the workforce shortages to critically high numbers. All healthcare settings are experiencing it, yet home care struggles on its own for several rather unique reasons.

- We provide advanced care in the home, not in a facility setting. Yet, to grow our revenue and ensure sustainability, we must grow our patient census which requires an adequate number of highly skilled, trained staff.
- Our reimbursement rates for Medicaid limit our ability to pay adequate and competitive wages or to recruit new staff.
- The pandemic has resulted in many staff leaving home care for other healthcare specialties who pay more or retiring early due to the stressors upon them.
- As many highly experienced professionals depart, they take with them clinical skills and years of hands-on practice and knowledge, reducing the experience of the remaining teams, creating a practice gap.
- **Lastly and most importantly, our feeder pipeline for staff is not a priority for hiring as**
 - The curricula for nursing, allied health and medicine rarely if ever include home care and hospice;



- The clinical rotations are extremely limited due to the high volume of students needing placement with low numbers of agencies able to provide experiences; and
- Those entering a career in healthcare rarely think home care and hospice is as exciting and sexy as “saving lives” in a hospital.

Therefore, we strongly support this legislation as it will encourage affordable education, which in turn, can open up many career options in healthcare at home, the most cost-effective and preferred setting. In addition, we support legislation to improve the education pipeline and incorporate home care and hospice as a viable and respected career path. Other ways to enhance the healthcare at home workforce would be to creatively address the challenging home care and hospice clinical experiences and rotations and to support expanding both faculty and student placements for all levels of healthcare including nursing, therapy, aides, and medicine.

We appreciate the Committee’s focus on this critical issue and encourage you to consider a broader approach, outside hospital and nursing home walls, to meeting the healthcare workforce challenges in our state. Our Association and its members would gladly offer their expertise and recommendations.

Thank you for your consideration of our position.

Tracy Wodatch

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